



**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

**In re Application of:** Akram et al.

**Serial No.:** 09/590,621

**Filed:** June 8, 2000

**For:** STEREOGRAPHIC METHOD  
FOR FABRICATING STABILIZERS FOR  
FLIP-CHIP TYPE SEMICONDUCTOR  
DEVICES (amended)

**Confirmation No.:** 1302

**Examiner:** N. Berezny

**Group Art Unit:** 2813

**Attorney Docket No.:** 2269-3936US  
(99-0066.00/US)

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence along with any attachments referred to or identified as being attached or enclosed is being deposited with the United States Postal Service as First Class Mail on the date of deposit shown below with sufficient postage and in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

January 25, 2005  
Date

*Rachael Harris*  
Signature

Rachael Harris  
Name (Type/Print)

**AMENDMENT**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This Amendment is being filed in response to the Office Action mailed on October 25, 2004, the three-month shortened statutory period for response to which expires on January 25, 2005.

Amendments to the claims are set forth in the listing of the claims, which begins on page 2 of this paper;

Corrections to the drawings are identified on page 9 of this paper, with replacement  
formals being enclosed herewith; and

Remarks begin on page 10 of this paper.

02/14/2005 SDAVIS 00000001 201469 0959062E  
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# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

09/590621

## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20=	RCE
INDEPENDENT CLAIMS	minus 3=	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT 1	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	40	40	=
Independent	6	5	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT 2	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total			=
Independent			=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT 3	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total			=
Independent			=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	385.00
XS 9=	
X43=	
+145=	
TOTAL	

RATE	FEE
BASIC FEE	770.00
XS18=	1
X86=	
+290=	✓
TOTAL	PAID

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
25	
XS 25	
100	
X 100	
180	
+180	
TOTAL	

RATE	ADDITIONAL FEE
50	
XS 50	
200	200 -
X 200	
360	
+200	
TOTAL	200 -

RATE	ADDITIONAL FEE
XS 25	
X 100	
+180	
TOTAL	

RATE	ADDITIONAL FEE
XS 50	
X 200	
+360	
TOTAL	

RATE	ADDITIONAL FEE
XS 25	
X 100	
+180	
TOTAL	

RATE	ADDITIONAL FEE
XS 50	
X 200	
+360	
TOTAL	